



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 2796

SERIAL NUMBER 09/909,740	FILING OR 371(c) DATE 07/20/2001 RULE	CLASS 707	GROUP ART UNIT 2165	ATTORNEY DOCKET NO. 4622-123 US
------------------------------------	-----------------------------------------------------------	---------------------	-------------------------------	-------------------------------------------

APPLICANTS

Dave Ladouceur, Boulder, CO;
 Scott Schorer, Lafayette, CO;
 Gregg Lauer, Boulder, CO;
 Todd Hoven, Ft. Collins, CO;
 Bruce Bacon, Littleton, CO;
 Mike Shell, Boulder, CO;

**** CONTINUING DATA *******

This application is a CIP of 09/604,183 06/27/2000 ABN and claims benefit of 60/219,484 07/20/2000
 and claims benefit of 60/219,523 07/20/2000
 and claims benefit of 60/219,535 07/20/2000
 and claims benefit of 60/219,572 07/20/2000
 and claims benefit of 60/219,739 07/20/2000
 and claims benefit of 60/219,744 07/20/2000
 and claims benefit of 60/219,873 07/20/2000

**** FOREIGN APPLICATIONS ********nm*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
 09/06/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes, <input checked="" type="checkbox"/> no <input type="checkbox"/> yes, <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY CO	SHEETS DRAWING 19	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 3
------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------	-----------------------------	---------------------------	--------------------------------

ADDRESS

25241

TITLE

Integrated management of product information

FILING FEE RECEIVED 858	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------------	-------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------